

The Entrant agrees to maintain the price designated below for six months after closing date of exhibition.

Telephone No. _____ Address 538 East 84th St NEW YORK 28 NY Zone No. _____

Please Enclose Registration Fee of \$1.00 (Check or Money Order) With Entry Blank

Entry blanks must be filled out and returned to the Museum on or before April 3, those postmarked later than April 3 will not be accepted.

LIST OF CLASSES ON BACK